08 SEP -4 PH 1: 41

FEC FORM 1	ORGANIZATIO		- Office Use Only
1. NAME OF COMMITTEE (in		the lines.	FE4M5
BOB SCH	taffer for us s	ENATE	
ADDRESS (number a	nd street) PO BOX 1/02/35		
(Check if a is changed)	DEMUER		
COMMITTEE'S E-MA	CITY ALL ADDRESS	STAT	E ZIP CODE
Heamso	haffer@bobschaf	fer for schal	e com
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
[MMM. b	obschafferforsena	e.com	
COMMITTEE'S FAX	NUMBER		
303-150	1-11365		
2. DATE	8 2008		
3. FEC IDENTIFIC	CATION NUMBER	849.85]	
4. IS THIS STATE	MENT NEW (N) OR	AMENDED (A)	
I certify that I have	examined this Statement and to the best of my	knowledge and belief it is true	e, correct and complete.
Type or Print Name	, , , , , , , , , , , , , , , , , , ,	ranger	
Signature of Treasur	,, On ,	Date	
NOTE: Submission of	false: erroneous, or incomplete information may sul		
Office Use	ŧ.	For further Information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 12/2007)